

**Tickets Provided by  
Agency Report**

**A Public Document**

TICKETS PROVIDED BY  
AGENCY REPORT

<b>1. Agency Name</b>		Date Stamp	California Form <b>802</b>
City of Imperial Beach		<b>RECEIVED</b>  2009 DEC -7 P 2:00	For Official Use Only
Division, Department, or Region (if applicable)			
Street Address			
825 Imperial Beach Blvd., Imperial Beach, CA 91932			
Area Code/Phone Number	E-mail	CITY MANAGER/PERSONNEL <input type="checkbox"/> Amendment (Must be filed in Part 5.)	
(619) 423-8301	ibcclerk@cityofib.org	Date of Original Filing: _____ (month, day, year)	
Agency Contact (name and title)			
Jacqueline M. Hald, City Clerk			

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 12 / 03 / 09 Description of Event: City employee drawing  
\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Face Value of Ticket: \$ 65.00

Agency Event ☐ Yes ☒ No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Legoland California

Number of Tickets Received: 1 Ticket(s) Provided to Agency: ☒ Gratuitously ☐ Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution
Hector Lopez	1	5.3 (j) City employee drawing.

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: City of Imperial Beach

Name of Individual or Organization: Erika N. Ceja Number of Tickets: 1


Description of Organization: Local Government

Address of Organization: 825 Imperial Beach Blvd., Imperial Beach, CA 91932  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
Attracting and retaining highly qualified employees in City Service.

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

 Gary Brown City Manager 12/03/09  
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)